APPLICATION TRANSFER REQUEST FOR APPLICATION S.N. _09/754 547_

Section I. TRANSFER REQUEST BY (PRINT NAME) _MN VON BUHR_ Date _7/10/01_

TO: Art Unit _2166_ Class/Sub _705/2_ FROM: A.U. _2171_ Class _707_

REASON:

db is specific to health care management

ok for 705/2
SMD

Gatekeeper Concurrence _____ Hand carried: Personally accepted by _____

Section IIa. DISPOSITION BY RECEIVING TC By: _____ A.U. _____ Date _____

☐ ACCEPTED BY RECEIVING T.C.

NOT ACCEPTED

☐ Foward to receiving TC Post Classifier

☐ Nonclassification issue/other, return to Originating TC/AU _____

REASON:

Section IIb. DISPOSITION BY RECEIVING TC POST CLASSIFIER

☐ This dispute was resolved. Foward to TC/AU _____ Class/Sub _____ Post Classifer _____ Date _____

Concurring _____ Date _____

☐ This dispute was not resolved, foward to DISPUTE RESOLUTION PANEL

Post Classifier Assessment:

Gatekeeper Concurrence _____ Post Classifier _____ Date _____

Section III. DISPOSITION BY DISPUTE RESOLUTION PANEL Date _____

Panel Decision: Foward to Technology Center/Art Unit Class/Sub _____

REASON:

Panel Member _____ Concurring Panel Member _____

☐ This application **MAY NOT** be returned to the dispute resolution panel, **THIS IS A FINAL DISPOSITION.**